

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA
ROME DIVISION**

IN RE:)	CHAPTER 13
MATTHEW DAVID LANDERS,)	
MELEAH BETH LANDERS,)	CASE NO. R18-41619BEM
)	
DEBTORS,)	JUDGE ELLIS-MONRO

AMENDMENT TO SCHEDULE D

COME NOW the Debtors in the above-styled bankruptcy action and files this amendment to the original Debtors' Petition, filed on July 12, 2018 and shows the Court the following:

Schedule D Creditors holding Secured Claims heretofore filed in this proceeding is hereby amended by adding the following secured creditors:

CREDITOR	DESCRIPTON	AMOUNT
U.S. Department of Housing & Urban Development 451 7 th Street SW Washington, D.C. 20410	Notice Only	\$0.00
AMENDED TOTAL OF SCHEDULE D		\$105,179.00
AMENDED TOTAL OF LIABILITIES		\$142,016.32

This 20th day of August, 2018.

107 E. 5th Avenue
Rome, GA 30161
(678) 861-1127 (Phone)
(706) 413-1365 (Fax)
lawoffice@kellycanhelp.com

/s/Jeffrey B. Kelly
JEFFREY B. KELLY
Law Office of Jeffrey B. Kelly, P.C.
Attorney for Debtors
Georgia Bar No. 412798

Fill in this information to identify your case:

Debtor 1 **Matthew David Landers**
First Name Middle Name Last Name

Debtor 2 **Meleah Beth Landers**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF GEORGIA**

Case number **18-41619-bem**
(if known)

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 1st Franklin Financial <small>Creditor's Name</small> 135 E Tugalo Street Toccoa, GA 30577 <small>Number, Street, City, State & Zip Code</small> Opened 7/01/16 Last Active 8/22/17 <small>Date debt was incurred</small> 2500 <small>Last 4 digits of account number</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;">hhg</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	\$3,196.00	Unknown

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☒ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim relates to a community debt

2.2 Bank of America <small>Creditor's Name</small> P.O. Box 25118 Tampa, FL 33622-5118 <small>Number, Street, City, State & Zip Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px;">Home at 66 Mango Rd NE Rome, GA 30161 Floyd County</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit	\$71,534.00	\$107,485.00	\$0.00
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Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Debtor 1 **Matthew David Landers** Case number (if know) **18-41619-bem**
 First Name Middle Name Last Name
 Debtor 2 **Meleah Beth Landers**
 First Name Middle Name Last Name

☐ Check if this claim relates to a community debt ☐ Other (including a right to offset)

Opened **5/26/00**
 Last Active
 Date debt was incurred **9/01/17** Last 4 digits of account number **3071**

2.3 Coosa Valley CU Describe the property that secures the claim: **\$12,210.00** **\$10,000.00** **\$2,210.00**
 Creditor's Name
2010 Nissan Murano
2010 Redmond Cir NW
Rome, GA 30165
 Number, Street, City, State & Zip Code
 As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
 Nature of lien. Check all that apply.
☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)
 Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt
 Opened **04/15** Last Active
 Date debt was incurred **9/18/17** Last 4 digits of account number **0001**

2.4 Floyd Healthcare Management, I Describe the property that secures the claim: **\$2,702.00** **\$0.00** **\$2,702.00**
 Creditor's Name
Judgment
PO Box 233
Rome, GA 30162
 Number, Street, City, State & Zip Code
 As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
 Nature of lien. Check all that apply.
☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)
 Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt
 Date debt was incurred Last 4 digits of account number

2.5 Nissan Motor Acceptance Describe the property that secures the claim: **\$15,537.00** **\$16,000.00** **\$0.00**
 Creditor's Name
2012 Nissan Maxima
8900 Freeport Pkwy
Irving, TX 75063
 Number, Street, City, State & Zip Code
 As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Debtor 1 **Matthew David Landers** Case number (if know) **18-41619-bem**
 First Name Middle Name Last Name
 Debtor 2 **Meleah Beth Landers**
 First Name Middle Name Last Name

Who owes the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Opened 04/15 Last Active 10/02/17
 Date debt was incurred 10/02/17 Last 4 digits of account number 0001

2.6 **U.S. Department of Housing & Urban Development**
 Creditor's Name
451 7th St SW
Washington, DC 20410
 Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$0.00 \$0.00 \$0.00

Notice Only

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:
 If this is the last page of your form, add the dollar value totals from all pages.
 Write that number here:

\$105,179.00
 \$105,179.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐ Name, Number, Street, City, State & Zip Code
Floyd County Magistrate
3 Government Plaza Suite 227
Rome, GA 30161
 On which line in Part 1 did you enter the creditor? 2.4
 Last 4 digits of account number

☐ Name, Number, Street, City, State & Zip Code
Michael T. Bryan LLC
Attorney for Floyd Healthcare
PO Box 107
Rome, GA 30162
 On which line in Part 1 did you enter the creditor? 2.4
 Last 4 digits of account number

☐ Name, Number, Street, City, State & Zip Code
Thomas H Manning
420 East Second Avenue
Rome, GA 30161
 On which line in Part 1 did you enter the creditor? 2.4
 Last 4 digits of account number

Debtor 1	Matthew David Landers	Case number (if know)	18-41619-bem
	First Name Middle Name Last Name		
Debtor 2	Meleah Beth Landers		
	First Name Middle Name Last Name		

Fill in this information to identify your case:

Debtor 1 **Matthew David Landers**
First Name Middle Name Last Name

Debtor 2 **Meleah Beth Landers**
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **NORTHERN DISTRICT OF GEORGIA**

Case number **18-41619-bem**
(if known)

☒ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)		
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$	107,485.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$	28,250.00
1c. Copy line 63, Total of all property on Schedule A/B.....	\$	135,735.00

Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$	105,179.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$	1,850.32
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$	34,987.00
Your total liabilities		\$ 142,016.32

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)		
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$	4,040.00
5. Schedule J: Your Expenses (Official Form 106J)		
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$	3,565.00

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes
7. **What kind of debt do you have?**
☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to

Debtor 1 **Matthew David Landers**
Debtor 2 **Meleah Beth Landers**

Case number (if known) **18-41619-bem**

the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **4,333.00**

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 1,850.32
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 1,850.32

AFFIDAVIT

The undersigned hereby declares under penalty of perjury, that the statements made in the foregoing are true and correct to the best of his/her information, knowledge and belief.

This 20th day of August, 2018.

/s/Matthew Davis Landers
DEBTOR

/s/Meleah Beth Landers
DEBTOR

CERTIFICATE OF SERVICE

This is to certify that I have this day served a copy of the foregoing Amendment to Schedule D on the following by U. S. Mail, in a properly stamped and addressed envelope.

Chapter 13 Trustee
191 Peachtree Street, Suite 2200
Atlanta, GA 30303

Matthew D. Landers
Meleah B. Landers
66 Mango Road NE
Rome, GA 30161

This 20th day of August, 2018.

/s/ Jeffrey b. Kelly
Jeffrey B. Kelly, Esquire
Attorney for Debtors
Bar No. 412798
107 E. 5th Avenue
Rome, GA 30161
Phone (678) 861-1127
Fax (706) 413-1365
lawoffice@kellycanhelp.com

AMENDED MATRIX R18-41619BEM
August 20, 2018

U.S. Department of Housing & Urban Development
451 7th Street SW
Washington, D.C. 20410